Ų.	<u>, ·                                     </u>				•			lC	)/7	$124_{i}$	924	
• ,	•							Applica	tion or	Docket Nu	mber	
PATENT	APPLICATION Effect	ON FEE D			ion reco	P.DG 1264-002F						
	CLAIMS A	S FILED (Column		_	umn 2)		SMALL I			OTHE	R THAN ENTITY	
AL CLAIMS	<b>S</b>	20				-	RATE	FE		RATE	FEE	
		NUMBER	FILED .	NUM	BER EXTRA		BASIC FE	E 385.	00 OI	BASIC FEI	770.00	
L CHARGE	ABLE CLAIMS	20 - mi	กบร 20=	6			X\$ 9=		OF	X\$18=		
PENDENT			= E auni	0			X43≈		OF	X86=	1 1	
IPLE DEPE	NDENT CLAIM P	RESENT					+145=		OF	+290=		
e difference	e in column 1 is	less than z	ero, enter	*0* in	column 2		TOTAL	380	COP	TOTAL	1	
<u> </u>	(Column 1)	MENDE	- PAR' (Colun		(Column 3)		SMALL	ENTIT	 Y OR	OTHER SMALL		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI TIONA FEE	IL.	RATE	ADDI- TIONAL FEE	
tal	• /3	Minus	•	20	- /	ſ	X\$ 9=		OR	X\$18=		
dependent	entation of MI	Minus	em S	CL AIM	= /		X43=		OR	X86=		
		Jeru-ce Der	ENDEN	·		ſ	+145=	7	OR	+290=		
								ADDIT, FEE OR ADDIT, FEE				
	(Column 1)		(Colum		(Column 3)	_			_			
	REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
al	• 13	Minus	<b></b> S	<del>)</del>	=	: [	X\$ 9=		ÓR	X\$18=		
ependent	· CATION OF LE	Minus	••• (2	2	= /	.	X43=		OR	X86=	- /	
DI PRESE	NTATION OF MU	LIPLE DEP	ENDENT	CLAIM		-			<b>H~</b> ```			

		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA					
	Total	1.13	Minus	. 90	=					
	Independent	. 1	Minus	2	= /					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									

\* If the difference in column 1 is less than zero, enter "0" in column 2

**TOTAL CLAIMS** 

**TOTAL CHARGEABLE CLAIMS** 

MULTIPLE DEPENDENT CLAIM PRESENT

INDEPENDENT CLAIMS

Total ·

Independent

FOR

:	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE	۱L
	X\$ 9=		<b>O</b> R	X\$18=		1
	X43≈		OR	X86=		I
	+145=		OR	+290=		
7	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		

		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER. AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA					
	Total	• 13	Minus	J- 20	=					
	Independent	• (	Minus	3	=					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									

ADDI-RATE TIONAL TIONAL RATE FEE FEE X\$ 9= X\$18= OR X43= X86= OR +145= +290= \* If the entry in column 1 is less than the entry in column 2, write "O' in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\* ADDIT. FEE

OR \*\*TOTAL OR \*\*T OR ADDIT. FEE

ADDI-

,							Application or Docket Number					nber
' PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003							RD		101	$\mathcal{I}_{\mathcal{C}}$	24, C	124
CLAIMS AS FILED - PART I						SMAL	LE	NTITY		OTHER	RTHAN	
٦	OTAL CLAIMS		· (Colum	· (Column 1) (Column			TYPE			OR		
		, ————					RATE		FEE	]	RATE	FEE
F	OR 		NUMBER FILED NUI		NUM	BER EXTRA	BASIC FI		375.00	OR	BASIC FEE	750.00
T.	OTAL CHARGE	ABLE CLAIMS	m	minus 20= *			X\$	9=		OR	X\$18=	
	DEPENDENT C		minus 3 =			X4:	X42=		OR	X84=		
M	ULTIPLE DEPE	NDENT CLAIM F	PRESENT				+14	 0=		OR	+280=	
* 1	f the difference	e in column 1 is	less than z	ero, enter	"0" in	column 2	TOT	Δi		OR	TOTAL	
	C	CLAIMS AS A	AMENDE	D - PAR	T II				<u> </u>	Jon		711001
_	· <del>  </del>	(Column 1)		(Colun	nn 2)	(Column 3)	SMA	LL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL √FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 12	Minus	* 2	0	= /	X\$ 9	=		OR	X\$18=	1
AME	Independent	* /	Minus	****	3_	=	X42	=		OR	X84=	/
<u> </u>	FINST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+140	)=	-\	OR	+280=	/
						•	TO	TAL			TOTAL	
		(Column 1)	•	(Colum	n 3)	(Column 3)	ADDIT.	FEE		OR,	ADDIT. FEE	
<u></u>		CLAIMS		HIGHE	ST			_	ADDI-	•		4001
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	RAT	Ε	TIONAL FEE		RATE	ADDI- TIONAL FEE
Q N	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	O/ 4114	=	X42	=		OR	X84=	
	rino i Friese	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		+140	_			.200	
							10	1		OR	+280= TOTAL	
							ADDIT, F			OR ,	ADDIT. FEE	
		(Column 1) CLAIMS	1	(Colum HIGHE		(Column 3)				_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RATE	<u> </u>	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	44		=	X\$ 9	_		OR	X\$18=	
AME	Independent	*	Minus	***		=	X42=	7		ŀ	X84=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		-	+		OR	704-	
- 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
****	f the "Highest Nur f the "Highest Nur	nber Previousty Pa nber Previousty Pa	id For IN THI: id For IN THI	S SPACE is I S SPACE is	less than less than	n 20, enter "20." n 3. enter "3."	ADDIT. F	EE L			TOTAL ODIT. FEE	
1	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE										mo 1	